

**MINUTES  
TOBACCO RESEARCH AND EDUCATION OVERSIGHT  
COMMITTEE**

**FEBRUARY 27, 2001  
DOUBLETREE HOTEL, SAN FRANCISCO AIRPORT**

**MEMBERS PRESENT:**

**LOURDES BAEZCONDE-GARBANATI, PH.D.**  
**JENNIE R. COOK, CHAIRPERSON**  
**GUS T. DALIS, ED.D**  
**THOMAS PATON**  
**DOROTHY RICE**  
**GEORGE RUTHERFORD, M.D, M.P.H.**  
**KEN WESSON**

**VACANCIES (APPOINTING AUTHORITY):**

**HEALTH CARE EMPLOYEES REPRESENTATIVE**  
**(SENATE RULES COMMITTEE)**  
**VOLUNTEER HEALTH ORGANIZATION REPRESENTATIVE**  
**(SPEAKER OF THE ASSEMBLY)**  
**LOCAL HEALTH DEPARTMENT REPRESENTATIVE**  
**(GOVERNOR)**  
**TARGET POPULATION GROUP REPRESENTATIVE**  
**(GOVERNOR)**  
**DEPARTMENT OF HEALTH SERVICES REPRESENTATIVE**  
**(GOVERNOR)**

**MEMBERS ABSENT:**

**DAVE BURNS, M.D.**

**OTHERS IN ATTENDANCE:**

**DILEEP G. BAL, M.D.** CHIEF, CANCER CONTROL BRANCH, DEPARTMENT OF HEALTH SERVICES (DHS)  
**M.F. BOWEN**, TOBACCO RELATED DISEASE RESEARCH PROGRAM (TRDRP)  
**THERESA BOSCHERT**, BREATH – AMERICAN LUNG ASSOCIATION (ALA), EAST BAY  
**JEFF CLINGENPEEL**, HEALTH PROGRAM SPECIALIST, DHS, TOBACCO CONTROL SECTION (TCS)  
**LAURA EASTMAN**, GROUND ZERO  
**ELIZABETH EMERSON**, MARIN COUNTY LOCAL LEAD AGENCY  
**CHRISTINE FENLON**, PRESCRIPTION FOR CHANGE  
**GREG FRANKLIN**, CHIEF, OFFICE OF MULTICULTURAL RELATIONS, DHS  
**LARRY GRUDER, PH.D**, DIRECTOR, SPECIAL RESEARCH PROJECTS, UNIVERSITY OF CALIFORNIA (UC)  
**SUSANNE HILDEBRAND-ZANKI, PH.D.**, DIRECTOR, TRDRP  
**JOON-HO YU**, ASIAN PACIFIC ISLANDER TOBACCO EDUCATION NETWORK (APITEN)

**SUSAN HUNTER**, AFRICAN AMERICAN TOBACCO EDUCATION NETWORK (AATEN)  
**GERALD KILBERT, Ed.D.**, DEPARTMENT OF EDUCATION, HEALTHY KIDS PROGRAM  
OFFICE (HKPO)  
**DIAN KISER**, BREATH- ALA, EAST BAY  
**KIRK KLEINSCHMIDT**, AMERICAN HEART ASSOCIATION (AHA)  
**PAUL KNEPPRATH**, ALA  
**JON LLOYD**, CHIEF, DATA ANALYSIS AND EVALUATION UNIT, DHS/TCS  
**JOHN LUDDEN**, PLUMAS COUNTY OFFICE OF EDUCATION  
**BOB MINERT**, PLUMAS COUNTY OFFICE OF EDUCATION  
**MARGO MCGLONE**, SOLANO COUNTY OFFICE OF EDUCATION  
**SUE NOSEWORTHY**, PRESCRIPTION FOR CHANGE  
**CHERYL RANEY**, SACRAMENTO COUNTY OFFICE OF EDUCATION  
**APRIL ROESLER**, DHS/TCS  
**BOB SANDS**, CALIFORNIA DEPARTMENT OF FINANCE  
**ROBIN SHIMIZU**, ASSISTANT CHIEF, DHS/TCS  
**ROXANNA URSUA**, APITEN  
**MARGARET SHIELD**, TRDRP

## **1. WELCOME AND INTRODUCTIONS**

Mrs. Jennie R. Cook, Chair, called the meeting to order at 9 a.m. Mrs. Cook then asked that committee members and others in attendance briefly introduce themselves.

## **2. APPROVAL OF MINUTES, REVIEW OF CORRESPONDENCE**

Mrs. Cook asked for a **MOTION** to approve the December 12, 2001, meeting minutes that were mailed to all the members. **MOTION CARRIED UNANIMOUSLY**, and the **MINUTES** were approved with no corrections or amendments.

Mrs. Cook stated that the minutes made reference to a letter that Tobacco Research and Education Oversight Committee (TEROC) was considering sending to the University of California (UC) Regents concerning Phillip Morris' External Research Program. She added that she had received letters from a number of agencies in support of TEROC's position regarding the acceptance of Phillip Morris' money for research purposes. The agencies she had letters from were Tobacco Related Disease Research Program (TRDRP), American Lung Association (ALA), American Cancer Society (ACS), and the Next Generation Alliance, among others. She stated that some of these agencies have tabled this issue for their next scheduled meeting.

Mr. Thomas Paton inquired if the UC Regents had responded to TEROC regarding this issue, and Ms. Cook responded that they had not.

Dr. Hildebrand-Zanki said that she thought the applications for funding (to the Phillip Morris External Research Program) were due soon and that she had not heard of anyone receiving funds from them. She added that there wasn't anything in their call for applications that gives a funding timeline, or when they were going to make decisions on whom they were going to fund.

Dr. Larry Gruder pointed out that in fairness to the UC Regents, it should be noted that the University did indeed respond to TEROC, and they did so in a timely manner.

Dr. Dileep Bal said that he wanted the minutes to reflect that, in stating that this is a serious problem that the UC needs to address, he was not trying to contradict the University of California. He observed that since this problem goes beyond the UC system, perhaps TEROC is in a position to provide some leadership in the matter. For instance, it has become a real problem at Cornell University. He indicated that Cornell had become somewhat reliant on tobacco money, and to some extent, where money and tobacco is involved, universities tend to “bargain with the devil.” He added that it has affected fund raising at Cornell, and that there are some very good people involved, and he stressed that he did not in any way intend to question the integrity of the researchers involved.

Dr. Hildebrand-Zanki stated that she thought that the principle of “academic freedom” is also confounding the issue, insofar as the ability of investigators to find their own sources of funding is generally not questioned.

Dr. Gus Dalis stated that it’s not unlike the “book covers” issue in the public schools. People tend to want to accept those book covers because kids need them.

Dr. George Rutherford stated that possibly TEROC was dealing with the wrong entity within the university system. He added that maybe they should be dealing with the system-wide Academic Senate, and that if the President of the UC Regents can say “no” to more Scholastic Assessment Tests (SATs), it can certainly address this issue.

Dr. Gruder reported that TRDRP is devoting an issue of its newsletter to the pros and cons of universities and other research institutions accepting research funds from the tobacco industry. The newsletter includes an article by TRDRP staff member Dr. Margaret Shields on the policies of various research institutions. Dr. Gruder also said that it is important to understand that there will be a debate on tobacco industry research funding because only a handful of institutions have policies prohibiting acceptance of such grants.

Mr. Ken Wesson pointed out that this is a battle we (TEROC) should take on.

Mrs. Cook said that she could see the public saying, “If they want to give us good money to do good research, why are you fighting them?”

Dr. Hildebrand-Zanki stated that she thought that Dr. Rutherford’s suggestion of addressing our concerns to the Academic Council or Academic Senate was an excellent idea. She added that the Regents are very reluctant to tread on academic freedom, which is probably why they did not take up the suggestion of banning particular funding from a source that is legal. Dr. Hildebrand-Zanki also stated that she thought that this issue is entirely different from the UC’s divesting of tobacco stock.

Dr. Rutherford stated that he saw different levels of response to this; one would be that the Academic Senate could recommend an out-right prohibition (of accepting these kinds of monies), which he doubted that they would do. Also, they could recommend that tenure and promotion decisions take into account the source of grant funding and whether or not it is acceptable, or should be excluded.

Mrs. Cook agreed that TEROC should send a letter to the Academic Senate. Mrs. Cook then asked for Dr. Rutherford's assistance in framing the letter. Dr. Rutherford agreed.

Dr. Hildebrand-Zanki stated that just because research is being funded by tobacco money doesn't necessarily mean that the science is tainted. The insidious part is that the industry is using the good science to cover the bad science and to create confusion in the minds of the public as to whether or not secondhand smoke does have a health effect.

Mrs. Cook then redirected the discussion to the letter to the DHS Director asking for the release of the *Independent Evaluation Wave 2 Report*. She reported that DHS had not responded. She added that TCS staff had informed her that all of the WAVE 2 data were scheduled to be released in the week or two following the meeting, which would be the first or second week in March.

In other developments, Mrs. Cook made note of the recent decision by the Regents to divest their tobacco stock. She commented that this was a great step forward.

Dr. Gruder said that he did not think that the Regents had *divested* tobacco industry stocks from their portfolio, but rather that they owned no industry stock and decided to continue this practice.

In other news, Mrs. Cook informed the committee that the State Board of Equalization had put aside until May a regulatory decision that could potentially cut the sales tax on tobacco. According to her understanding, the issue was with the Cheaper Cigarettes chain, and the regulation would impact sales tax and a wide variety of products including tobacco.

Mr. Jon Lloyd said his understanding was that the proposed rule would relieve wholesalers and distributors of the current requirement that they pay the surtax on products offered as a rebate (for example, two packs for one specials). He said it was reported in the paper that distributors currently pay the full tax, and that with the proposed rule the state would lose about \$9 million in tobacco tax revenues per year.

Mrs. Cook brought up an article in the Los Angeles Times, which characterized California's Tobacco Control Program as a model for public health. In this article, there is mention of the American Lung Association study that found that if the other 49 states had the same laws that are in California, approximately 300,000 more lives would be saved.

Mrs. Cook noted that Congress would soon be taking up the question of the federal Food and Drug Administration (FDA) regulating tobacco. Already a couple of legislative bills are being drafted on the subject.

Mrs. Cook reported that, as far as she could see, regarding the Governor's Proposed Budget for fiscal year (FY) 2001-2002, only \$20 million from the Master Settlement Agreement (MSA) payments to the State are budgeted for tobacco control, out of the total \$500 million. She said that this amount is far too little.

In another development, Mrs. Cook said that the Attorney's General (AG) office announced a settlement with RJ Reynolds about the distribution of free cigarettes. Mrs. Cook stated that RJ Reynolds had violated terms of the MSA and also the States' Consumer Protection Laws, and that the mailing of free cigarettes has been stopped. Mrs. Cook remarked that we have the AG to thank for taking the lead on that.

Mrs. Cook stated that Dr. David Burns did an outstanding job on *60 Minutes II* and that TEROC thanks him for the great job he did.

Mrs. Cook reported receiving a letter from a tobacco program in Hong Kong along with a copy of a magazine called "Men's Health" that has been distributed in Hong Kong. An article in the magazine focused on the link between smoking and impotence and the California program was mentioned.

She informed the committee that the World Health Organization would be taking testimony on the Framework Convention for Tobacco Control in San Francisco on March 8. Dr. Bal suggested that she give testimony on behalf of TEROC. She announced that she would also be representing TEROC at the American Legacy Foundation site visit in Sacramento on March 7.

Mrs. Cook concluded her report by noting that a number of counties are now looking at outdoor smoking ordinances.

Mrs. Cook asked Mr. Kirk Kleinschmidt of the AHA to briefly go over some of the more salient tobacco-related legislation this session.

Mr. Kleinschmidt said that the most important currently active tobacco bill is Senate Bill (SB) 35. It is sponsored by Senator Ortiz, Chair of the Senate Health Committee, and the author is Senator Escutia. The AHA, ALA and the ACS are supporting the bill, which would provide additional funds from the Tobacco Settlement money as a tobacco "prevention supplement." He added that at this stage the bill does not have a lot of detail.

### **3. REPORTS BY: TOBACCO CONTROL SECTION, CALIFORNIA DEPARTMENT OF EDUCATION & THE UC, TOBACCO-RELATED DISEASE RESEARCH PROGRAM**

Referring to the TCS report to TEROC, Dr. Bal asked if there were any questions

Dr. Rutherford stated that during the last meeting there was a discussion about Proposition 65 and its possible applicability to the regulation of herbal cigarettes. He was curious as to whether the Food and Drug Branch might have some interest in this issue,

especially if a mis-branding of some kind were occurring. Dr. Bal said TCS staff would look into that question.

Professor Dorothy Rice asked how many people or organizations were present at the Tobacco Industry Monitoring Evaluation (TIME) Request for Proposals (RFP) information meeting. Mrs. April Roeseler answered that a dozen or so people were at the meeting and that four letters of intent had been received.

Ms. Robin Shimizu gave an update on media issues. Ms. Shimizu stated that eight TV advertisements were scheduled for production, including a “Crocodile” II and III, and an African American TV ad. Latino and Spanish billboards and print media were recently approved, and four other new ads are being prepared to counter the “image campaign” of the tobacco industry.

Mrs. Cook stated that the Governor’s Proposed Budget has an enhanced level of funding for media again this year. She stated that it was about \$45 million.

Mr. Jon Lloyd updated the committee on developments regarding the administration of DHS’ evaluation of the Proposition 99 in-school programs. As an addendum to the Data Analysis and Evaluation Unit Section of the written TCS report to the Committee, Mr. Jon Lloyd gave the committee an update on the latest developments in this effort.

As background, he explained that DHS is, by statute, responsible for evaluating the effectiveness of the school-based, proposition 99 tobacco use prevention programs administered through CDE. In the past, DHS has contracted with the Gallup Organization to perform this evaluation. As part of the evaluation, the Gallup Organization has performed three “waves” of in-school surveys over the past five years. The CDE has supported each of these surveys with a letter to the affected County Superintendents of Education and schools urging their participation and stating that they are required by statute to participate as a condition of receiving Proposition 99 funds.

As explained in the TCS report, as the contract with the Gallup Organization drew to a close, DHS selected WestEd through a competitive bidding process to conduct the evaluation and to carry out the next in-school survey scheduled for the fall of 2001. WestEd also performs the California Healthy Kids Survey (CHKS) and the California Student Survey (CSS) for the CDE. To acquire better statewide data, DHS expanded the scope of the schools evaluation survey to be a random sample of all middle and high schools (grades 6-to12) in the state rather just a sample of those schools in 18 selected counties, as was done under the Gallup Organization contract. The number of schools was increased from 208 to 360, and the number of students surveyed was reduced from 25,000 to 18,000.

To facilitate the success of this survey, TCS sought a letter of support from CDE to the affected schools. WestEd emphasized the importance of having such a letter in securing an adequate school participation rate.

Mr. Jon Lloyd reported that since first hearing of this survey more than eight months ago, CDE has opposed it on the grounds that it increases the “survey burden” on the schools at

a time when they are already under increasing pressure to demonstrate their academic performance. However, CDE last week indicated some willingness to cooperate by proposing language for a joint letter from both departments.

Mr. Jon Lloyd explained that the DHS/TCS found the conditions required by the CDE for its participation in the joint letter unacceptable. Among other conditions, CDE requires DHS to agree that the fall 2001 survey would be a one-time-only activity and would not serve as a baseline for subsequent surveys. Another CDE condition was that in the future DHS would not have a separate survey but instead integrate its survey into the CDE's CHKS and CSS so that all future data gathered in the schools for the purposes of the DHS evaluation would be from the CHKS and CSS.

Mr. Jon Lloyd explained that these conditions were unacceptable to TCS because integrating the schools Proposition 99 programs evaluation survey into these two surveys could not provide the scientific information needed for the DHS/TCS evaluation of the school programs. He pointed out that the surveys address different grade levels and the sampling plans differ in significant ways.

After noting that the two departments have reached an impasse regarding support for the survey, Mr. Jon Lloyd asked Dr. Gerald Kilbert, Chief of the Healthy Kids Program Office, if he had accurately described the situation as it currently stood.

Dr. Kilbert agreed that the two departments appear to be at an impasse. He suggested that it would have to be resolved at higher levels. Dr. Kilbert said that the CDE considered DHS' survey too long and its sample size too large. Additionally, he contended that DHS was using the survey for "surveillance purposes" and that a much shorter survey would be sufficient to evaluate the tobacco use prevention programs in the schools.

Dr. Bal took issue with this claim, saying that evaluating the in-school programs required asking a wide range of questions concerning student knowledge, attitudes and behaviors, and that it could not be limited to a few behavioral-based questions and questions about school programs. Dr. Bal said that over the past eight months the CDE had been obstructive of the DHS effort to conduct its evaluation, and that TCS staff had gone "far beyond the call of duty" to accommodate the concerns of the CDE.

Dr. Kilbert pointed out that Washington State had been able to integrate a selection of the most important YTS questions into its public school survey and still achieve the necessary comparability. He also emphasized the CDE's determination to reduce the time that the surveys' take away from classroom instruction in the schools.

Mrs. Cook said she did not think it was TERO's place to intervene in this matter, but she asked that the committee be updated on the issue at the next meeting.

#### **4. LEGISLATIVE UPDATE**

Mr. Paul Knepprath, who was originally scheduled to give the legislative update, arrived and handed out a short summary of tobacco-related legislation that had been introduced

this session. He explained that the deadline to introduce new bills was Friday, February 23<sup>rd</sup>.

Mr. Knepprath commented on the following tobacco-related bills:

- **Assembly Bill (AB) 163 (Florez) *School Nurses, Tobacco Settlement Funds***  
This bill would create the Tobacco Settlement Fund commencing July 2002, and would appropriate the entire amount of the state share to the State Department of Education for apportionment to school districts and County Offices' of Education, the California State University, and the University of California for school nursing-related purposes.
- **AB 188 (Vargas) *Restriction of Smoking in Public Parks***  
This bill would prohibit the smoking or disposing of any tobacco product within 50 feet of any sandbox area that is located in a public park.
- **AB 744 (Wesson & Koretz) *Tobacco Retailer Licensing***  
This bill states the Legislature's intent to license and regulate those businesses that manufacture, distribute and sell tobacco products. This is a "spot" bill that will be further defined through the legislative process.
- **AB 412 Wesson & Koretz) *Restriction of Self-Service Tobacco Sales***  
This bill would prohibit the self-service display of tobacco products, restrict free distribution of cigarettes on private property open to the public, and establishes minimum pack size (not fewer than 20) for the sale of cigarettes.
- **AB 1107 (Leach) *School-based Tobacco Programs***  
Among many other provisions, AB 1107 would delete the statutory requirement that the California Department of Education award and administer tobacco prevention grants.
- **AB 1453 (Koretz) *Tobacco Advertising & Use Limitations***  
This bill would 1) prohibit tobacco ads and displays in any retail establishment that are below four feet (from the floor), 2) prohibit ashtrays and matches in establishments that prohibit smoking, 3) prohibit smoking within 250 of a place where children congregate, and 4) prohibit the distribution of free tobacco samples to anyone whose age is not known to be 18 or over.
- **AB 1527 (Frommer) *Tobacco Settlement funds, Securitization***  
This bill would authorize the State Treasurer to sell all or a portion of the future right, title and interest in the state allocation of tobacco settlement funds and allow for the allocation of resulting funds to be set aside for health related expenditures.

In closing, Mr. Knepprath talked about **AB 744**, which is a spot bill that would require tobacco retailers to be licensed. He said that there would be a lot of discussion about this issue this year. He added that there would be a hearing date on March 12<sup>th</sup> in the



Assembly Governmental Organization Committee's chambers to look at the whole issue of retailer licensing.

Dr. Kilbert explained to the committee that at the federal level of legislation, the *Safe and Drug Free Schools Act* is attached to the *Improving America's Schools Act*, and that by definition, that law considers tobacco to be a drug, although tobacco was not highlighted in the legislation. Dr. Kilbert said it was his understanding that there are currently about seven bills that may affect the definition of drugs and that tobacco is increasingly more visible in this sort of legislation.

Dr. Hildebrand-Zanki talked about the Annual Investigators Meeting (AIM 2000) that TRDRP sponsored on November 30 – December 1, 2000. Dr. Hildebrand-Zanki stated that over 425 individuals registered for the conference.

Dr. Hildebrand-Zanki stated that TRDRP has received applications for its 10<sup>th</sup> funding cycle. She added that during March, April, and May, TRDRP will conduct 10 study sections, and that approximately \$21 million will be available for new awards. She also stated that the newly created Colorado Tobacco Research Program (CTRP) has asked TRDRP to conduct the peer review of CTRP's applications. The first budget for Colorado's program is approximately \$4.5 million and will go up to \$8 million the second year.

Dr. Hildebrand-Zanki concluded with comments on the Governor's Proposed Budget for FY 2001-02. She said that the Governor's Budget that was released on January 10, 2001, proposes an allocation of \$20.21 million for TRDRP from the Proposition 99 Research Account. She emphasized that for FY 2000-2001 the amount appropriated from the Research Account for the DHS Cancer Registry increased by \$3.35 million to \$5.05 million. The proposed budget for 2001-2002 again contains additional funding for the Cancer Registry of \$3.2 million, for a total proposed allocation of \$4.93 million. She said the that TRDRP is extremely concerned that the mission of the TRDRP is being compromised by these diversions and that alternative funding sources for the Cancer Registry must be identified.

Mrs. Cook said that she would push not only to increase the \$20 million from the MSA, but also for additional funding so that the TRDRP continues along with all of the other programs under Proposition 99.

Dr. Rutherford pointed out that there was an analogy in the Breast Cancer Research Program where 10 percent of the monies that go to the program are taken off the top and given to the Cancer Registry. Dr. Rutherford said that his point was that somewhere back in history the legislature thought that it made sense to support the Registry.

Dr. Bal wanted the minutes to reflect that he was providing clarification to the accuracies at fact, and that he takes no position on the Administration's allocations of resources, being that he is a servant of the Department. Dr. Bal then stated that Dr. Hildebrand-Zanki's position was correct because this redirection of funds to the Registry came four to five years after Proposition 99 passed and the appropriations from the

Research Account were set. Dr. Bal then stated that he felt that Dr. Hildebrand-Zanki's case is valid and 100 percent right.

Dr. Bal observed that there appears to be little or no logic to this allocation scheme, and that the Department of Finance decides these things.

Dr. Hildebrand-Zanki explained that in the budget language last year, the additional funding was stated to be for staff and personnel costs. She said that Governor Davis deleted that language, then turned it into a one-time allocation, with no explanation for either action.

Mrs. Cook informed everyone that the next TEROC meeting would be on, May 22, 2001, and that it would be in Sacramento at TCS headquarters, from 10 am to 2 pm.

## **5. COMMUNITIES OF EXCELLENCE PROGRAM**

Mrs. April Roeseler then reported on the Communities of Excellence Program.

Mrs. Roeseler stated that the Communities of Excellence (CX) in Tobacco Control is a community-planning model. The concept was to bring together in one planning tool all of the best project intervention ideas from programs across the state and use this tool to help in local program planning. She stressed the importance of having systematic collection of local data. Local data really motivates and moves key opinion leaders more than statewide data does. She went on to explain that the aim of the CX program is to preserve local autonomy while providing for more standardization.

This approach will broaden the participation and diversity of local tobacco control planning, while ensuring a systematic framework for assessing community needs. She also reported that the goal is to develop meaningful community norm change strategies and also to strengthen the evaluation in of local program efforts.

Mrs. Roeseler stated that originally 63 indicators about tobacco control were identified, but this was reduced to 38. She stated that the indicators consist of environmental or community level measures. All of the project directors, the local program evaluators, members of TCS' Evaluation Task Force, members of the ACS and the CX workgroup were involved in the rating process used to select the final indicators. Each of the indicators are rated on a measure of Quality and a measure of Feasibility. Quality was defined as "how well does that measure move tobacco control forward at the local level" and feasibility dealt with the ease of data collection, whether the data really could be collected.

Mrs. Roeseler closed by stating that TCS intended to use the CX model to develop a Local Strength of Tobacco Control Construct. This would include (a) the resources that a county has for tobacco control, (b) their capacity to develop tobacco control (counties certainly vary in their political and demographic make-up that facilitates or hinders their ability to achieve tobacco control), (c) the extent to which anti-tobacco efforts are going on, (d) the community conditions, and (e) acceptance of the CX model.

Dr. Lourdes Baezconde-Garbanati said that she heard that the CDC-funded national networks for tobacco control had TCS send a copy of the CX program to them because they were considering using it for some of their evaluation purposes in programs that they are establishing in tobacco control at the national level. She added that already the model is going outside of California.

Professor Rice complimented Mrs. Roeseler and TCS on their work.

#### **6 (a). PRESENTATIONS: “WORKING WITH PHARMACISTS IN THE CONTEXT OF SMOKING CESSATION”**

Dr. Karen Hudmon from the Stanford Research Institute gave the next presentation on *Working with Pharmacists in the Context of Smoking Cessation*.

Dr. Hudmon started by describing herself as a tobacco researcher, and told the committee that she is currently on faculty at University of California, San Francisco. One area of her research involves working with pharmacists and pharmacy students to improve their ability to help patients quit smoking. Their studies show that if you take the prescription nicotine patch with no counseling there is about a 15 percent chance of actually staying quit at least six months. She added that if you have a pharmacy consultant, this rate nearly doubles to 31 percent and if you have a behavioral program added, the rate goes to about 44 percent.

Dr. Hudmon stated that, in order to conduct a study on the expansion of the pharmacist’s role in smoking cessation settings, they contacted the National Cancer Institute to get funding. She said that the study is under way and that they have interviewed about 70 patients, and 100 patients is their goal. They are recruiting retail and online pharmacies and posting flyers at points-of-sale in *Longs Drug Stores* throughout the Bay Area. The patients purchasing these products will see the flyer at the counter, and can call the 800 number and participate in a 20-30 minute interview. Callers are asked what kind of assistance they would like to receive if they were to get assistance from the pharmacists. She stated that the callers are also asked if they can afford to and would they be willing to pay for this type of service.

Dr. Hudmon stated that only about 9 percent of pharmacists have had formal training for tobacco cessation counseling. Because of these low numbers, they have developed training curricula for pharmacists. The training is provided by the University of Pittsburgh School of Pharmacy and is about six hours long.

Dr. Hudmon acknowledged support from the TRDRP in conducting her research, and concluded her presentation by introducing the next speaker, Christine Fenlon from the *Prescription for Change* Program.

#### **6 (b). PRESENTATIONS: “THE PROUD TO BE TOBACCO FREE CAMPAIGN”**

The next presenter, Ms. Christine Fenlon, Project Director for *Prescription for Change*, began with a quick overview of what their program is and what their four main goals are. She said the program is part of the California Medical Association Foundation, and is Proposition 99 competitive grantee. She continued by saying that *Prescription for Change* is a coalition of pharmacists, physicians, health care professionals and consumers working to eliminate tobacco sales and promotions in California and chain drugstores. *Prescription for Change* seeks to increase pharmacist involvement in tobacco control, cessation and prevention activities and to diminish social acceptance of tobacco products in commercial centers through consumer awareness.

The program's primary goals are: 1) to increase the number of pharmacists involved in tobacco control activities to increase the public's disapproval of "health centers" marketing & selling tobacco products, 2) increase the number of individual drugstores in the four major drugstore chains (*Longs, Rite Aid, Sav-on and Walgreen's*) and the number of independent pharmacies that do not promote or sell tobacco in their stores, 3) increase the number of California pharmacies and health care providers (physicians, nurse practitioners & others) involved in the *Proud to be Tobacco Free Campaign*, and 4) act as a state and local resource for information on issues pertaining to tobacco free pharmacies and drugstores through California.

The *Proud to be Tobacco Free Campaign* was developed to recognize pharmacies and drugstores that have voluntarily removed tobacco from their shelves. This campaign is one way for the entire health care community to support local businesses that are working to reduce youth access to tobacco and to increase consumer awareness of the inherent contradiction of selling tobacco products alongside prescription medicines. Ms. Fenlon said the program is based on the principle that no one should be allowed to make a profit from selling a product that, when used as directed, causes death and disease, while at the same time selling medicines aimed at healing diseases caused by tobacco.

Ms. Fenlon said the program works to persuade pharmacies and drugstores not to sell tobacco products. Those that do not are given a *Proud to be Tobacco Free* decal to place in their window. The decal lets their customers know they truly care about your health. So far, over 40,000 *Proud to be Tobacco Free* bags and other items have been distributed.

Participating physicians, nurses and other health care practitioners use a corresponding sticker on the back of each prescription they write. It reminds patients to look for the *Proud to be Tobacco Free* decal. The sticker creates an opportunity for discussion between practitioner and patient about his/her tobacco use.

The project maintains a *Proud to be Tobacco Free* statewide database, which includes registered tobacco-free drugstores and pharmacies throughout California. Currently, there are 408 tobacco-free drugstores in 48 counties. The database is accessible to health care providers as well as the general public on the web site at: [www.RxforChange.org](http://www.RxforChange.org). The list is also available through links on numerous other healthcare agency sites including the California Pharmacists Association, the California Medical Association, the American Cancer Society, and both the American Heart Association and the American Lung Association web sites.

In recognition of tobacco-free pharmacies and drugstores, a Certificate of Commendation can be signed and presented by local tobacco control advocates, the California Medical Association and *Prescription for Change* Advisory Board Chairperson. In Orange County, the Local Lead Agency and Orange County On-Track Youth Coalition along with their county health officer made presentations to local tobacco free pharmacies during National Pharmacy Week. The press conference and presentation received coverage on several local television and radio stations.

Ms. Fenlon said that one of the biggest barriers is that pharmacies don't want to go tobacco-free because they fear they are going to lose customers. In June 2000, the California State University Fullerton Foundation did a *California Adult Consumer Survey*, and one of the questions that were asked was: "If your drugstore stops selling tobacco products, would you shop there more or less or the same amount?" Ms. Fenlon reported that 96.8 percent responded that they would shop there the same or more if their drugstore stopped selling tobacco.

Ms. Fenlon concluded by saying that the most important thing is to spread the word about this campaign.

## **7. OTHER BUSINESS: ADJOURN**

With the last presentation concluded, Dr. Dalis (acting for Mrs. Cook who had to leave early to catch a plane) asked the members of TEROC or others in attendance if there were any questions of Ms. Fenlon or any other general questions.

With no questions being heard, the meeting was adjourned at 12:45 p.m.